

<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>PETITION FOR DIRECT PLACEMENT ADOPTION</b>	<b>FILE NO.</b>
--	---	-----------------

In the matter of \_\_\_\_\_, adoptee  
Full name of child

The petitioners are:

	Name and Social Security Number	Relationship to Adoptee	Address, City, State, Zip	Date and Place of Birth
<b>Adopting Mother</b>				
<b>Adopting Father</b>				

Each petitioner states:

- ☐ 1. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and ☐ remains ☐ is no longer pending.
2. The adoptee was born on \_\_\_\_\_ at \_\_\_\_\_.  
Birth date and time City, county, and state of birth ☐ parent/guardian.
- ☐ 3. The adoptee was temporarily placed in my home on \_\_\_\_\_ by a ☐ child placing agency.  
Date
4. The adoptee will be my heir at law. ☐ not be changed.
5. The adoptee's name will ☐ be changed to \_\_\_\_\_.  
First Middle Last
6. The adoptee's property is \_\_\_\_\_.
- ☐ 7. The parties to this adoption have elected not to exchange identifying information. A separate verified statement of the identifying information is attached.

**NOTE:** Do **not** complete items 8. and 9. if item 7. is checked.

8. The adoptee is:

\_\_\_\_\_  
Full name of child

\_\_\_\_\_  
Present residential address (if known)

The adoptee's parents are:

Father's name \_\_\_\_\_ Birth date \_\_\_\_\_ Mother's name (and maiden name) \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, state, zip \_\_\_\_\_ City, state, zip \_\_\_\_\_

(PLEASE SEE OTHER SIDE)

Do not write below this line - For court use only

☐ 9. The adoptee's court appointed guardian and/or conservator is: \_\_\_\_\_

☐ 10. I have received a copy of the reasonably obtainable non-identifying information required for a placement of the child for adoption. A copy is attached.

☐ 11. I have been informed of the availability of counseling services. I ☐ have ☐ have not received counseling.

☐ 12. No preplacement assessments have been completed on us other than those attached.

☐ Preplacement assessments have been started but not completed as follows:

**I REQUEST:**

13. Termination of all existing parental rights inconsistent with the order of adoption, entry of an order approving placement of the child with me, and entry of an order of adoption with the adoptee's name recorded as

☐ 14. The adoption be completed immediately because: \_\_\_\_\_

☐ 15. The court to waive the required investigation because the adoptee has been placed in foster care with me for at least 12 months and a foster family study was completed or updated within the last 12 months.

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Attorney/Agency signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney/Agency name (type or print)

\_\_\_\_\_  
Bar no.

\_\_\_\_\_  
Signature of petitioner mother

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of petitioner father

\_\_\_\_\_  
City, state, zip

\_\_\_\_\_  
Telephone no.

\_\_\_\_\_  
Petitioner telephone no.

**IT IS ORDERED:**

☐ 16. The preplacement assessment filed with the petition has been reviewed by the court and:

a. it is a sufficient investigation of the adoptive home and no further investigation is required.

b. \_\_\_\_\_  
Court agent or employee, child placing agency  
is directed to conduct an additional investigation and report its findings in writing to this court, within 3 months of this order, in accordance with the provisions of section 46 of the Michigan Adoption Code.

☐ 17. The full investigation is waived. The petitioner(s) shall file a copy of the most recent foster family study as updated and supplemented.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Bar no.